PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed appropriate. All further correspondence including the Pattern advance orders and notification of maintenance received by mailed to the surrent correspondence address as appropriate. All further correspondence including the Pattern advances orders and notification of maintenance received by mailed to the surrent correspondence address as appropriate. All further correspondence including the Pattern advances or the pattern advances or the pattern advances and the pattern advances are pattern as a pattern and the pattern advances are pattern as a pattern as a pattern and a pattern advances are pattern as a patte m

aintenance fee notifications.	new correspondence address, and/or (b) indicating a separate TEE ADDRESS
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)	Note: A certificate of mailing can only be used for domestic mailings of t

28008 7590 04/08/2008 DNAX RESEARCH INC.

LEGAL DEPARTMENT 901 CALIFORNIA AVENUE PALO ALTO, CA 94304

Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sulficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEB address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

	(Depositor's name)			
		(Signature)		
		(Date)		
mon.	ATTORNEY DOCTOR	CONTENNAL TRONING		

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/720:026 11/21/2003 Madaline Chirica DX01074B1K 3154 TITLE OF INVENTION: MAMMALIAN RECEPTOR PROTEIN DCRS5:METHODS OF TREATMENT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	07/08/2008
EXAM	IINER	ART UNIT	CLASS-SUBCLASS]		
SEHARASEYON	, JEGATHEESAN	I647	424-143100	-		
I. Change of correspondence address or indication of "Fee Address" (37 CFR I.563). Change of correspondence address (or Change of Correspondence Address form F10/SB122) attached. "Fee Address" indication of "Fee Address" Indication form F10/SB147; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name ville perintee.		era 2 Tom Bro	1 Edwin P. Ching 2 Tom Brody 3 Gregory R. Bellomy	

ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

SCHERING CORPORATION KENILWORTH, NEW JERSEY

Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🔯 Corporation or other private group entity 📮 Government 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

Issue Fee A check is enclosed. Dublication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 04-1239 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above) □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature / Gregory R. Bellomy/ Date July 2, 2008 Typed or printed name Gregory R. Bellomy Registration No. 48, 451

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 manates to complete, including gathering, preparing, and within 50 cm and/or suggestion. For excluding gathering, preparing, and within 50 cm and/or suggestion. For excluding this bardon, should be sent to the chief Information Officer, U.S. Paters and Trademark Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 2231-450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 2231-450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.